



APPLICATION FOR CONTRACTOR LICENSE
FIRE PROTECTION SPRINKLER

Public Protection Cabinet
Department of Housing, Buildings and Construction
Fire Protection Systems
101 Sea Hero Road Suite 100
Frankfort, Kentucky 40601
Telephone: (502) 573-0385

() Initial Application

() Renewal Application

In compliance with KRS Chapter 198B, I hereby request that I be issued or have renewed a Fire Protection Sprinkler Contractors license by the Department of Housing, Buildings and Construction as required by law. I am currently engaged or intend to engage in the preparation of technical drawings, installation, repair, alteration, addition, maintenance or inspection of fire protection sprinkler systems.

I agree to notify the Commissioner within thirty (30) days of my change of employment of any individual named as a certificate holder for this license. I also agree that any information in this application may be verified.

Application Made For: _____
(NAME OF COMPANY)

Business Address: _____
(Include both PO Box number and
street address if applicable) _____,
(City) _____ (County or Parish)
State: _____ Zip: _____

DATE BUSINESS FILED WITH KENTUCKY SECRETARY OF STATE'S OFFICE: Month _____ Day _____ Year _____

OWNERS BIRTH DATE: Month _____ Day _____ Year _____

FEDERAL IDENTIFICATION NUMBER: _____

BUSINESS TELEPHONE NUMBER: (_____) _____

APPLICATION MADE BY: _____
(NAME OF INDIVIDUAL)

Certificate Of Competency Holder Applicant(S) Is/Are:
(Include certificate number if Individual(s) _____
have ever or now hold Kentucky _____
(Certificate of Competency) _____

I, _____, swear or affirm that to the best of my knowledge
(Applicant)
and belief, the statements contained herein in this application are true and complete.

(Applicant Signature) Date: _____

State of _____
County of (Parish of) _____
Sworn before me this _____, day of _____, 20 _____

NOTARY PUBLIC

(My Commission Expires)

Include nonrefundable fee of \$250.00 and "ACORD" Certificate of Liability Insurance

